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| Fill in this information to identify your case: | | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|-------------|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Ezrarette | |
| | 100.10 | First name | First name |
| y p e | Write the name that is on your government-issued | L. | |
| | picture identification (for | Middle name | Middle name |
| | example, your driver's | Stewart | |
| | license or passport | Last name | Last name |
| | Bring your picture | | |
| | identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| _ | | | |
| 2. | All other names you have used in the last | First name | First name |
| | 8 years | The thank | THOU THAT IS |
| | - , | Middle name | Middle name |
| | Include your married or maiden names. | | |
| | maiden names. | Last name | Last name |
| | | | |
| | | First name | First name |
| | | | |
| | | Middle name | Middle name |
| | | Look name | Last wares |
| _ | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- <u>1027</u> | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer | 9 xx - xx- | 9 xx - xx- |
| | Identification number (ITIN) | | |

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| D | ebtor 1 Ezrarette | L. Stewart | Case number (if known) |
|----|--|---|--|
| | First Name | Middle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 9877 S Charles St Apt 2n Number Street | Number Street |
| | | Chicago Illinois 60643 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | City State Zip Code | City State Zip Code |
| _ | | Oity Otate Zip Oode | Orace Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | - | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 Ezrarette | L. | Stewart | Case number (if knd | pwn) |
|---|--|--|--|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Ca | ase | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and | | |
| 8. How you will pay the fee | more details about cashier's check, or may pay with a crec I need to pay the fundividuals to Pay I request that my funded in the official poverty you choose this op | how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-printere in installments. If you choose Your Filing Fee in Installments (Cofee be waived (You may request ot required to, waive your fee, and line that applies to your family significant or the property of the property | ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are used. | the clerk's office in your local court for e fee yourself, you may pay with cash, in payment on your behalf, your attorney an and attach the <i>Application for AA</i>). If you are filling for Chapter 7. By law, a lay if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | WhenWhenWhen | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to | · - | | o you want to stay in your residence? Set You (Form 101A) and file it with |

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| Debtor 1 Ezrarette First Name | | L. | idle Name | Stewart Last Name | Case nu | umber (if known) | |
|---|--------------|--|----------------------------------|--|---|---|---|
| Part 3: Report About Any | Busin | esses | S You Own as a S | Sole Proprietor | | | |
| 12. Are you a sole proprietor of any full- or part-time | ✓ | No. Yes. | Go to Part 4. Name and location | on of business | | | |
| business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business Number | s, if any Stree | vt . | | |
| If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | | Health Ca Single Ass Stockbrok | re Business (as deset Real Estate (as ker (as defined in ty Broker (as defin | State escribe your business efined in 11 U.S.C. § defined in 11 U.S.C. 11 U.S.C. § 101(53A) ned in 11 U.S.C. § 10 | § 101(27A)) C. § 101(51B)) N)) | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | appr shee | i you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set opropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance theet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not xist, follow the procedure in 11 U.S.C. § 11 16(1)(B). | | | | | h your most recent balance |
| For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. No. Yes. | Bankruptcy Cod | Chapter 11, but I e. | | siness debtor according debtor according to the | o to the definition in the ne definition in the Bankruptcy |
| Part 4: Report if You Own | or H | ave A | ny Hazardous Pi | roperty or Any I | Property That Nee | eds Immediate Atten | ation |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and | ✓ □ | No. Yes. | What is the hazard? | , | | | |
| identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | Where is the proper | | Street | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | | State | Zip Code |

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Debtor 1 Ezrarette L. Stewart Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Ezrarette | L. | Stewart | Case number (if known |) |
|---|--|--|---|---|
| Part 6: First Name Answer These Que | Middle Name estions for Reporting Pur | Last Name 'poses | | |
| 16. What kind of debts do you have? | 16a. Are your debts prir "incurred by an indi No. Go to line 1 Yes. Go to line 1 16b. Are your debts prir money for a busines No. Go to line 1 Yes. Go to line 1 | marily consumer debts? ividual primarily for a pers 6b. 17. marily business debts? Ess or investment or throug 6c. | onal, family, or housel Business debts are debt gh the operation of the | ts that you incurred to obtain business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under C expenses are paid | er Chapter 7. Go to line 18. Chapter 7. Do you estimate th d that funds will be available | | perty is excluded and administrative ed creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,0 ☐ 5,001-10 ☐ 10,001-2 |),000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000, \$50,000, | 01-\$10 million 001-\$50 million 001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000, \$50,000, | 01-\$10 million 001-\$50 million 001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | correct. If I have chosen to file un of title 11, United States under Chapter 7. If no attorney represents out this document, I have | der Chapter 7, I am aware Code. I understand the re me and I did not pay or ag e obtained and read the no | that I may proceed, if of the life available under each gree to pay someone workice required by 11 U. | he information provided is true and eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed tho is not an attorney to help me fill S.C. § 342(b). ode, specified in this petition. |
| | I understand making a fall connection with a bankru both. 18 U.S.C. §§ 152, 1 | se statement, concealing uptcy case can result in fin | property, or obtaining | money or property by fraud in imprisonment for up to 20 years, or |
| | /s/ Ezrarette Stewart Signature of Debtor 1 | | Signature of I | Debtor 2 |
| | | 2017 MM / DD / YYYY | Executed o | n |

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| Debtor 1 Ezrarette | L. | Stewart | Case number (if | known) | | | |
|--|---------------------------|------------------------|------------------------------|---|--|--|--|
| First Name | Middle Name | Last Name | | | | | |
| For your attorney, if you are represented by one | eligibility to proceed ur | nder Chapter 7, 11, 1 | 2, or 13 of title 11, United | nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the | | | |
| If you are not | debtor(s) the notice req | uired by 11 U.S.C. § | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I | | | |
| represented by an | have no knowledge afte | er an inquiry that the | information in the sched | ules filed with the petition is incorrect. | | | |
| attorney, you do not | 4.0 | | | | | | |
| need to file this page. | /s/ Jason Diaz | | Date _ | 6/7/2017 | | | |
| | Signature of Attorney | for Debtor | | IM / DD / YYYY | | | |
| | | | | | | | |
| | | | | | | | |
| | Jason Diaz | | | | | | |
| | Printed name | | | | | | |
| | Semrad Law Firm | | | | | | |
| | Firm name | | | | | | |
| | 20 S. Clark Street | | | | | | |
| | Street | | | | | | |
| | 28th Floor | | | | | | |
| | | | | | | | |
| | Chicago | | Illinois | 60603 | | | |
| | City | | State | Zip Code | | | |
| | Contact phone | 3129130625 | Email address | jdiaz@semradlaw.com | | | |
| | | | | | | | |
| | - | | Illinois | <u> </u> | | | |
| | Bar number | | State | State | | | |

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| Fill in this infor | mation to identify your ca | ase: | |
|------------------------|----------------------------|-------------|----------------------|
| Debtor 1 | Ezrarette | L. | Stewart |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| П | Check if this is an |
|---|---------------------|
| | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | 50.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,521.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,521.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$12,600.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$8,083.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$10,138.00 |
| | \$30,821.00 |
| Your total liabilitie | |
| Your total liabilitie Part 3: Summarize Your Income and Expenses | |
| | |
| art 3: Summarize Your Income and Expenses | \$2,324.88 |

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Stewart Debtor 1 Ezrarette _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,059.85 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$8,083.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$8,083.00

9g. Total. Add lines 9a through 9f.

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| F-11 | | | | | <u> </u> | | | |
|--|--------------------------------------|---|---|-----------------------------------|---|---------------------|--|---|
| Fill in this | informatio | n to identify your c | ase: | | | | | |
| Debtor 1 | | arette | L. | Mana a | Stewart | | | |
| Debtor 2 | FIFS | t Name | Middle N | name | Last Name | | | |
| (Spouse, if fi | ling) Firs | t Name | Middle N | Name | Last Name | | | |
| United Sta | ates Bankru | ptcy Court for the: | Northern | | District of Illinois | | | |
| Case num | hor | | | | (State) | | | |
| (If known) | | | | | _ | | | |
| Officia | al Form | n 106A/B | | | | | | Check if this is an amended filing |
| | | | uds. | | | | | · · |
| | | VB: Prope | | int on on | and only once if an asset fits in me | thou | ana aatamami list tha | 12/1 |
| category v responsibl write your | where you le for supp name and | think it fits best. I lying correct infor d case number (if k | Be as complete a mation. If more s known). Answer e | and accu space is every que | set only once. If an asset fits in mo irate as possible. If two married peo needed, attach a separate sheet to estion. Other Real Estate You Own or I | ople are this fo | e filing together, both a rm. On the top of any a | are equally |
| | | | • | - | esidence, building, land, or similar p | | | |
| V | No. Go to | | | • | , , , | | | |
| | Yes. When | re is the property? | | | | | | |
| _ | | | | <u>Wh</u> at i | is the property? Check all that apply. | | | claims or exemptions. Put |
| 1.1 | Street add | lress, if available, or | other description | - Sir | gle-family home | | | red claims on Schedule D: aims Secured by Property. |
| | | ,, | | Duplex or multi-unit building | | | Current value of the | Current value of the |
| | - | | | | andominium or cooperative anufactured or mobile home | | entire property? | portion you own? |
| | | | | La | | | | |
| | Number | Street | - | Inv | estment property | | Describe the nature of interest (such as fee s | |
| | City | Ctata | Zin Codo | | neshare her | | the entireties, or a life | |
| | City | State | Zip Code | | | | | |
| | | | | Who h | as an interest in the property? Che | ck | (see instructions) | ommunity property |
| | | | | one. | | | | |
| | | | | | btor 1 only btor 2 only | | | |
| | | | | | btor 2 only btor 1 and Debtor 2 only | | | |
| | | | | | least one of the debtors and another | | | |
| | | | | Other | information you wish to add about | this ite | m, such as local | |
| | | | | | rty identification number: | | , | |
| If you | own or ha | ve more than one, li | st here: | What i | is the property? Check all that apply. | | Do not doduct socured | claims or exemptions. Put |
| 1.2 | | | | | ngle-family home | | the amount of any secu | red claims on Schedule D: |
| | Street add | lress, if available, or | other description | Du | plex or multi-unit building | | | nims Secured by Property. |
| | | | | . 🗖 Co | ndominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | anufactured or mobile home | | | |
| | Number | Street | | - La | na vestment property | | Describe the nature of | f your ownership |
| | | | | | neshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | Hot | her | | | |
| | | | | Whah | as an interest in the preparty? Cha | ماد | | mmunity property |
| | | | | one. | as an interest in the property? Che | CK | (see instructions) | |
| | | | | De | btor 1 only | | _ | |
| | | | | | btor 2 only | | | |
| | | | | | btor 1 and Debtor 2 only | | | |
| | | | | ш | least one of the debtors and another | 4L! - '' | | |
| | | | | | information you wish to add about rty identification number: | tnis ite | m, sucn as local | |

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| Debtor 1 | Ezrarette First Name | L. Middle Name | Stewart Last Name | Case numbe | r (if known) | |
|-------------------|--|---|--|------------------|--|---|
| 1.3 <u>Street</u> | et address, if available, or oth | | hat is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nun City | nber Street State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature of interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | | The has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an ther information you wish to add | other | Check if this is co (see instructions) | mmunity property |
| | the dollar value of the por ve attached for Part 1. Wri | pi tion you own for a te that number he | roperty identification number: II of your entries from Part 1, inclure. | · | | |
| Do you ow | | equitable interest | in any vehicles, whether they are lso report it on Schedule G: Executo | - | - | |
| | ns, trucks, tractors, sport util | | · | ry contracts and | Unexpired Leases. | |
| 3.1 | Make Model: Year: | Ford Focus 2008 | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property. |
| | Approximate mileage: Other information: | 95000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community | | Current value of the entire property? \$1925.00 | Current value of the portion you own? \$1925.00 |
| 3.2 | Make Model: Year: Approximate mileage: | | instructions) Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

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| otor i | Ezrarette First Name | L. Middle Name | Stewart Last Name | Case numbe | er (if known) | |
|--------|---|-------------------|---|-----------------------------------|--|---|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) | ly s and another | the amount of any secu | claims or exemptions. Put ired claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) | ly s and another | the amount of any secu | claims or exemptions. Put irred claims on <i>Schedule D</i> aims Secured by Property. Current value of the portion you own? |
| | | | • | | _ | |
| | mples: Boats, trailers, motor No Yes Make Model: | • | who has an interest in the pone. | notorcycle accessori | Do not deduct secured the amount of any secu | claims or exemptions. Put irred claims on <i>Schedule D</i> |
| Exa | mples: Boats, trailers, motor No Yes Make | • | er recreational vehicles, other , fishing vessels, snowmobiles, r | property? Check ly s and another | Do not deduct secured the amount of any secu | · · · · · · · · · · · · · · · · · · · |

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| D | ebtor 1 | Ezrarette First Name | L. Middle Name | Stewart E Last Name | Case number (if known) | |
|----------|--------------------------|------------------------------|--|---|--------------------------------------|---|
| Pa | art 3: | Describe \ | our Personal and House | | | |
| D | o you | own or ha | ve any legal or equitable i | interest in any of the follow | wing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| - | Examp | | and furnishings bliances, furniture, linens, china, | ı, kitchenware | | |
| V | No Yes. D | escribe | Couch/bed/Linens/Chest/Tv S | Stand/Loveseat/Kitchen Chairs | | \$500.00 |
| 7 | 7. Elect Examp | | ns and radios; audio, video, ster | reo, and digital equipment; com | puters, printers, scanners; music | |
| <u>✓</u> | No Yes. D | escribe | | | | |
| 8 | | | and figurines; paintings, prints, | , or other artwork; books, picture ; other collections, memorabilia, | | |
| <u>✓</u> | No Yes. C | Describe | | | | |
| 9 | | les: Sports, p | orts and hobbies hotographic, exercise, and othe ks; carpentry tools; musical inst | | ool tables, golf clubs, skis; canoes | |
| ∠ | No Yes. D | Describe | | | | |
| 1 | 10. Fire Examp | | fles, shotguns, ammunition, an | nd related equipment | | |
| ✓ | No | | | | | |
| | Yes. D | Describe | | | | |
| 1 | 11. Clot Examp No | | clothes, furs, leather coats, des | signer wear, shoes, accessories | | |
| V | | escribe | Used Clothing | | | \$300.00 |
| 1 | 12. Jew Examp | - | | gement rings, wedding rings, he | eirloom jewelry, watches, gems, | |
| ∠ | No Yes. C | escribe | Costume Jewelry | | | \$25.00 |
| 1 | | -farm anima les: Dogs, ca | Is as, birds, horses | | | |
| ✓ | 4 | Describe | | | | |
| 1 | - 14. Anv | other perso | nal and household items vou | did not already list, including | g any health aids you did not list | |
| ~ | No | | | ,, | • • • • • • | |
| Ē | Yes. C | escribe | | | | |
| | | | | m Part 3, including any entrie | es for pages you have attached | \$825.00 |

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| Debt | tor 1 Ezrarette | <u>L.</u> | Stewart | Case number (if known) | |
|--------|--------------------------------------|--|-----------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| Part 4 | 4: Describe Your | Financial Assets | | | |
| Do | you own or have ar | ny legal or equitable interes | t in any of the following | ? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash | | | | |
| E | ✓ No | ave in your wallet, in your home, i | · | hand when you file your petition Cash: | |
| 47 | | | | OdS11 | |
| 17. | and other similar in | savings, or other financial accounts nstitutions. If you have multiple ac | | res in credit unions, brokerage houses, tion, list each. | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Televisions (3)/Cellular Ph | one/Laptop | \$500.00 |
| | | 17.2. Checking account: | Chase Bank | | \$221.00 |
| | | 17.3. Savings account: | Southside Federal CU | | \$50.00 |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | . .——— |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | | , or publicly traded stocks s, investment accounts with broke | rage firms, money market ac | counts | |
| | ✓ No Yes | Institution or issuer name: | | | |
| | | | | | |
| | | | | | |
| 19. | an LLC, partnership, | | ated and unincorporated b | usinesses, including an interest in | |
| | Yes. Give specific information about | Name of entity | | % of ownership: | |
| | them | | | | |
| | | | | | |

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| Deb ⁻ | tor 1 | Ezrarette | L. | Stewart | Case number (if known) | |
|------------------|------------|------------------------|---|-------------------------------|--|--|
| | | First Name | Middle Name | Last Name | | |
| 20. | Neg | otiable instruments i | orate bonds and other negotial nclude personal checks, cashiers' ents are those you cannot transfel Issuer name: | checks, promissory notes | s, and money orders. | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 21. | | irement or pension | | | | |
| | | | RA, ERISA, Keogh, 401(k), 403(b) | , thrift savings accounts, o | or other pension or profit-sharing plans | |
| | | No | Type of account: | Institution name: | | |
| | Ш | Yes. List each account | | | | |
| | | separately. | 401(k) or similar plan: | | | |
| | | | Pension plan: | | | |
| | | | IRA: | _ | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | _ | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | You Exa | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | | Yes | Electric: | | | |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | _ | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Anr | nuities (A contract fo | r a periodic payment of money to | you, either for life or for a | number of years) | |
| | ✓ | No | | | | |
| | | Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debto | or 1 Ezrarette | L. Middle Name | Stewart | Case number (if known) | |
|-------|--|---|--|--|--|
| 24. | | | Last Name qualified ABLE program, or u | nder a qualified state tuition program. | |
| | Ves | nstitution name and description. Sepa | arately file the records of any int | erests.11 U.S.C. § 521(c): | |
| | _ | | | | |
| 25. | Trusts, equitab exercisable for | le or future interests in property (o | other than anything listed in | line 1), and rights or powers | |
| | ✓ No Yes. Describ | e | | | |
| 26. | | ghts, trademarks, trade secrets, a let domain names, websites, proceed | | | |
| | Yes. Describ | e | | | |
| 27. | • | hises, and other general intangibling permits, exclusive licenses, coope | | or licenses, professional licenses | |
| | No Yes. Describ | e | | | |
| | | | | | |
| Mon | ey or property | owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or property Tax refunds owe | · | | | portion you own? |
| | | · | | | portion you own? Do not deduct secured |
| | Tax refunds owe ✓ No ✓ Yes. Give sp | ed to you | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owe ✓ No — Yes. Give sprabout t | ed to you | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owe ✓ No Yes. Give spout to you alre | ed to you ecific information hem, including whether | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owe No Yes. Give spout to you alrow and the | ecific information hem, including whether eady filed the returns e tax years | pport, child support, maintenar | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns e tax years | pport, child support, maintenar | State: Local: nce, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns e tax years | pport, child support, maintenar | State: Local: nce, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns e tax years | pport, child support, maintenar | State: Local: nce, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns e tax years | pport, child support, maintenar | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns e tax years | pport, child support, maintenar | State: Local: Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe ✓ No Yes. Give spreadout to you alread the service of the serv | ecific information hem, including whether eady filed the returns to tax years | pport, child support, maintenar | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owe ✓ No Yes. Give sprabout tyou alread the service of the service | ecific information hem, including whether eady filed the returns to tax years | ts, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | No Yes. Give speabout tyou alread the Family support Examples: Past d ✓ No Yes. Give speach the Second of the S | ecific information hem, including whether eady filed the returns tax years ue or lump sum alimony, spousal su ecific information | ts, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | No Yes. Give spondsout to you alread the second to you alread the young the young to you alread the young the you | ecific information hem, including whether eady filed the returns tax years ue or lump sum alimony, spousal su ecific information | ts, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Ezrarette | L. | Stewart | Case number (if known) | |
|------|---|-------------------------------|--|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance p Examples: Health, disabili | | savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and lis | ance company | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property If you are the beneficiary property because someon | of a living trust, expect pro | | r, or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | | |
| 33. | | | u have filed a lawsuit or made nce claims, or rights to sue | a demand for payment | |
| | No Yes. Describe | | | | |
| 34. | Other contingent and u | ınliquidated claims of ev | very nature, including counterc | laims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets you | u did not already list | | | |
| | Ves. Describe | | | | |
| 36. | | • | Part 4, including any entries fo | | \$771.00 |
| Part | 5: Describe Any Bus | siness-Related Prope | erty You Own or Have an Ir | iterest In. List any real estate in Part | 1. |
| 37. | Do you own or have any | / legal or equitable inter | rest in any business-related pro | pperty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | pe D | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or | commissions you alrea | dy earned | | |
| | ✓ No Yes. Describe | · | | | |
| 39. | Office equipment, furnis Examples: Business-relate | | nodems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, electr | onic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Ezrarette | L. | Stewart | Case number (if known) | |
|-------|--------------------------------------|--|-------------------------------|---------------------------------|---|
| 40 | First Name | Middle Name equipment, supplies you use i | Last Name | ur trada | |
| 40. | | equipment, supplies you use i | ii business, and tools of yo | ur trade | |
| | No No Describe | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 42 | Interests in partnersh | ins or joint ventures | | | |
| | ✓ No | po o. joint romanoo | | | |
| | | Nam | e of entity: | % of ownership: | |
| | Yes. Give specific information about | | | | |
| | them | | | | |
| | | | | | |
| | | | | | . <u> </u> |
| 43. (| Customer lists, mailing | lists, or other compilations | | | |
| | ✓ No | | | | |
| | Yes. Do your lists i | nclude personally identifiable in | formation (as defined in 11 L | J.S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| 44. | Any business-related | property you did not already | list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | _ |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| 45. A | dd the dollar value of | all of your entries from Part 5 | i. including any entries for | pages you have attached | |
| | | er here | | | |
| | Describe Any F | arm- and Commercial Fig | shing-Related Property | You Own or Have an Interest In. | |
| Part | | n interest in farmland, list it in Par | | Tod Own of Flavo an interest in | |
| 46. | Do you own or have a | iny legal or equitable interes | t in any farm- or commerc | al fishing-related property? | |
| | No Code Ded 7 | | - | | Current value of the |
| | Yes. Go to line 47 | | | | portion you own? Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |

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| Debi | tor 1 Ezrarette | | ewart | Case number (if known) | |
|--------------|----------------------------|---|-----------------------|--------------------------------|-------------|
| | First Name | | st Name | | |
| 48. | Crops-either growing | or harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 40 | Farm and fishing equir | mont implements machinery fixture | s and tools of trado | | |
| 49. | — | oment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing suppl | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | Too. Booonbo | | | | |
| | | | | | |
| 51. | Any farm- and comme | rcial fishing-related property you did n | ot already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | | | | _ | |
| | | l of your entries from Part 6, including | | | |
| for Pa ▶ | art 6. Write that number | here | | | |
| | | | | | |
| | | | | | |
| Part | Describe All Pro | perty You Own or Have an Interes | st in That You Did No | t List Δhove | |
| | | perty of any kind you did not already lis | | | |
| 00. | | s, country club membership | ж. | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | I of your entries from Part 7. Write tha | t number here |) | > |
| | | • | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | I intale a Tatala at | Fools Doublef Heis Forms | | | |
| Part | List the Totals of | Each Part of this Form | | | |
| 55. I | Part 1: Total real estate | , line 2 | | > | |
| | | | | | |
| 56. r | oart 2 total vehicles, lin | e 5 | \$1925.00 | | |
| 57. P | art 3: Total personal an | d household items, line 15 | \$825.00 | | |
| 58 D | art 4: Total financial as | eate lina 36 | | | |
| | | | \$771.00 | | |
| 59. I | Part 5: Total business-re | elated property, line 45 | | | |
| 60. I | Part 6: Total farm- and f | ishing-related property, line 52 | | | |
| 61. I | Part 7: Total other prop | erty not listed, line 54 | | | |
| | | Add lines 56 through 61. | | | |
| ٥٤. | i otai personai property. | , ad into oo allough or | \$3521.00 | Copy personal property total | + \$3521.00 |
| | | | | sop, possensi proporty total p | |
| | | | | | \$3521.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Ezrarette | L. | Stewart | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Oldio) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | tt 1: Identify the Property You Clair | m as Exempt | | | | | | |
|----|--|---|---|------------------------------------|--|--|--|--|
| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. | | | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | | | | | |
| 2. | For any property you list on Schedule A | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: Used Clothing Line from Schedule A/B: 11 | \$300.00 | \$300.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | | | |
| | description: | \$500.00 | P | | | | | |
| | Couch/bed/Linens/Chest/Tv Stand/Loveseat/Kitchen Chairs | | \$500.00 100% of fair market value, up to any applicable statutory limit | _ | | | | |
| | Line from Schedule A/B: 06 | | | | | | | |
| 3. | ✓ No | very 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | | |

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Debtor 1 Ezrarette Stewart Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$500.00 description: **✓** \$500.00 Checking account, 100% of fair market value, up to any Televisions (3)/Cellular applicable statutory limit Phone/Laptop Line from Schedule A/B: 17 Brief 735 ILCS 5/12-1001(b) \$25.00 description: **✓** \$25.00 **Costume Jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 12 735 ILCS 5/12-1001(b) Brief description: \$221.00 **✓** \$221.00 Checking account, 100% of fair market value, up to any **Chase Bank** applicable statutory limit Line from 17 Schedule A/B: Brief 735 ILCS 5/12-1001(b) description: \$50.00 **✓** \$50.00 Savings account, 100% of fair market value, up to any Southside Federal CU applicable statutory limit

Line from Schedule A/B:

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| | | | Do | ocument Page 22 of | 68 | | |
|-------------------|--|--|---|--|-----------------------|---|---------------------------------------|
| Fill in t | his information | to identify your cas | se: | | | | |
| Debtoi | 1 Ezrare First N | | L. Middle Name | Stewart Last Name | | | |
| Debtoi (Spouse | · 2 , if filing) First N | Name | Middle Name | Last Name | | | |
| United | States Bankrup | tcy Court for the: | Northern | District of Illinois (State) | | | |
| Case r | number | | | | | | |
| Offi | cial For | m 106D | | | _ | | Check if this is ar amended filing |
| Sch | edule [|)· Credito | ors Who Ha | ve Claims Secur | ed by Prop | | 12/1 |
| more s name a | pace is needed and case number o any creditor No. Check t | l, copy the Additio er (if known). rs have claims se | ecured by your proper | le are filing together, both are eq mber the entries, and attach it to rty? with your other schedules. You ha | this form. On the top | of any additional pag | |
| Part 1 | _ | cured Claims | | | | | |
| | separately for ea | ach claim. If more th | nan one creditor has a pa | cured claim, list the creditor rticular claim, list the other creditors i der according to the creditor's name | , o. o. o | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Debtor 1 or Debtor 2 or Debtor 1 ar At least one and anothe | Street # Street IL 60601 State ZIP Code debt? Check one. hly hly and Debtor 2 only e of the debtors | 2008 Ford Focus As of the date you file Contingent Unliquidated Disputed Nature of lien. Check An agreement you car loan) | made (such as mortgage or secured n as tax lien, mechanic's lien) n a lawsuit | | \$1,925.00 | <u>\$10,675.0</u> 0 |
| | to a comm | unity debt 2/2017 | Last 4 digits of accou | ınt number0001 | | | |

incurred

\$12,600.00

Add the dollar value of your entries in Column A on this page. Write that number $\,$

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| | | | D | ocument | Page 23 of | 68 | | | |
|-----------------------------|---|--|---|--|---|---|---|--|--|
| Fill in t | his inforn | nation to identify your ca | ase: | | | | | | |
| Debtor | r 1 | Ezrarette First Name | L. Middle Name | Stewart Last Nam | | | | | |
| Debtor (Spouse | | First Name | Middle Name | Last Nam | | | | | |
| United | States B | ankruptcy Court for the: | Northern | District of Illino | | | | | |
| Case n | number n) | | | (Stat | e) | | | | |
| Offic | cial Fo | orm 106E/F | | | | | Chec | ck if this is an | amended filing |
| Sch | nedu | le E/F: Cre | ditors Who | Have U | nsecure | ed Claims | S | | 12/15 |
| other p Form 1 claims | earty to a 06A/B) a that are ries in th | and accurate as possi- iny executory contracts and on Schedule G: Exec- listed in Schedule D: C ne boxes on the left. Att | or unexpired leases the cutory Contracts and Leaditors Who Hold Clain tach the Continuation | nat could result in a Inexpired Leases (0 ms Secured by Pro Page to this page. | a claim. Also lis Official Form 10 perty. If more sp | t executory contrac 6G). Do not include pace is needed, cop | ets on <i>Schedu</i> any creditors by the Part yo | <i>le A/B: Prop</i> s with partial u need, fill it | erty (Official lly secured out, number |
| 2. L lis | No. 6 Yes. ist all of sted, identifications are sted at the sted | editors have priority un co to Part 2. your priority unsecured tify what type of claim it is possible, list the claims on Page of Part 1. If more planation of each type of | I claims. If a creditor has s. If a claim has both pri in alphabetical order acc e than one creditor holds | s more than one pric ority and nonpriority cording to the credito a a particular claim, lis | amounts, list that r's name. If you list the other credite | t claim here and sho have more than two ors in Part 3. | w both priority | and nonprior | ity amounts. |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | Priority C PO Box Number | reditor's Name 7346 Street | | Last 4 digits of a When was the de As of the date yo apply. | bt incurred? | n/a | \$8,083.00 | \$8,083.00 | \$0.00 |
| | ✓ Debt | hia Pennsylvar State urred the debt? Check ofter 1 only tor 2 only | Zip Code | Contingent Unliquidated Disputed Type of PRIORITY Domestic sup | / unsecured cla | im: | | | |
| | At le | tor 1 and Debtor 2 only ast one of the debtors an ck if this claim relates | | Taxes and cer government Claims for dea | tain other debts y | you owe the jury while you were | | | |
| | Is the cl | aim subject to offset? | | intoxicated Other. Specify | | | | | |

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| Debto | 1 Ezrarette First Name | L. Middle Name | Stewart Last Name | Case number (if k | nown) | |
|--------|--|---|---|--|---|--------------------|
| Part 2 | List All of Your NONPRIO | RITY Unsecured Cla | ims | | | |
| 3. D | o any creditors have nonpriority No. You have nothing to report Yes. st all of your nonpriority unsecunsecured claim, list the creditor sep | unsecured claims agai ort in this part. Submit the ared claims in the alpha parately for each claim. For | nst you? is form to the cou betical order of to reach claim listed, | he creditor who holds each oldentify what type of claim it is | . Do not list claims already in | cluded in Part 1. |
| | more than one creditor holds a par age of Part 2. | rticular claim, list the othe | r creditors in Part 3 | .If you have more than four pri | ority unsecured claims fill ou | t the Continuation |
| | | | | | | Total claim |
| 4.1 | ATG CREDIT Nonpriority Creditor's Name 1700 W CORTLAND ST STE 2 | | | 4 digits of account number num | 6780 3/2015 | \$300.00 |
| | Number Street | | As o | f the date you file, the claim | is: Check all that apply. | |
| | CHICAGO Illinois City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this claim relates to the claim subject to offset? No Yes | Zip Code one. d another | | ORIGINAL CRE | aration agreement or as priority claims | |
| 4.2 | CAVALRY PORTFOLIO SERV | | Last | 4 digits of account number | 3070 | \$3,941.00 |
| | Nonpriority Creditor's Name 4050 E COTTON CENTER BLV Number Street PHOENIX Arizon City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to the street of the claim subject to offset? No Yes | Zip Code one. d another | As o | | aration agreement or as priority claims ng plans, and other similar collecting for EDITOR: EXETER | |
| 4.3 | City of Chicago Parking Nonpriority Creditor's Name 121 N. LaSalle St # 107A Number Street Chicago Illinois City State Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and Check if this claim relates to the claim subject to offset? No Yes | Zip Code one. d another | Whe | 4 digits of account number in was the debt incurred? If the date you file, the claim Contingent Unliquidated Disputed Of NONPRIORITY unsecured Student loans Obligations arising out of a sep divorce that you did not report Debts to pension or profit-sharidebts Other. Specify Others | n/a is: Check all that apply. I claim: aration agreement or as priority claims | \$800.00 |

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Debtor 1 Ezrarette Stewart Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$620.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Other Is the claim subject to offset? **✓** No T Yes CREDIT COLLECTION SERV \$350.00 5806 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 11/2016 SHAWNEE SQUARE Number As of the date you file, the claim is: Check all that apply. Contingent CHILLICOTHE 45601 Ohio Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: COMCAST **✓** No **CABLE** Other, Specify Yes CREDIT MANAGEMENT LP 4.6 \$287.00 Last 4 digits of account number 9180 Nonpriority Creditor's Name When was the debt incurred? 3/2017 PO Box 118288 Number As of the date you file, the claim is: Check all that apply. Contingent 75011 Carrollton Texas Unliquidated Zip Code City State Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: WOW **✓** No Other. Specify CHICAGO

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Debtor 1 Ezrarette Stewart Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Devon Financial Services - Ashland \$600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 9455 S Ashland Ave Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60620 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Other Is the claim subject to offset? **✓** No Yes **DEVRY INC** \$1,740.00 4.8 0270 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 7/2012 1 TOWER LN STE 1000 Number Street As of the date you file, the claim is: Check all that apply. Contingent OAKBROOK 60181 Illinois Unliquidated **TERRACE** State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.9 ENHANCED RECOVERY CO L \$142.00 Last 4 digits of account number _ 8368 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 9/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: AT T No

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Debtor 1 Ezrarette Stewart Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** HARVARD COLLECTION 4.10 \$1,739.00 Last 4 digits of account number Nonpriority Creditor's Name 4839 ELSTON AVE When was the debt incurred? 1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60630 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: IL **✓** No DEPARTMENT OF HUMAN **SERVICE** Other. Specify Yes 4.11 ISAC \$6,424.00 Last 4 digits of account number 2302 Nonpriority Creditor's Name When was the debt incurred? PO Box 6180 Number Street As of the date you file, the claim is: Check all that apply. Contingent Indiana 46206 Indianapolis Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.12 ISAC \$3,679.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6180 When was the debt incurred? 9/2016 Number As of the date you file, the claim is: Check all that apply. Contingent 46206 Indianapolis Indiana Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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| Debtor | 1 Ezrarette L. Stewa First Name Middle Name Last Na | | |
|--------------|---|---|-------------|
| | _ | | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Continuation | on Page | |
| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.13 | Peoples Gas Light & Coke Co. | Last 4 digits of account number | \$900.00 |
| | Nonpriority Creditor's Name 200 E. Randolph St. | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago Illinois 60601 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | <u>'</u> | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Other | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |
| 4.14 | PORTFOLIO RECOVERY ASS | — Last 4 digits of account number 0876 | \$459.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 2/2016 | |
| | 120 CORPORATE BLVD STE 1 Number Street | When was the dept incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | NORFOLK Virginia 23502 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| [<u>-</u>] | <u> </u> | | *** |
| 4.15 | US DEPT OF ED/GLELSI Nonpriority Creditor's Name | Last 4 digits of account number 8581 | \$44,740.00 |
| | 2401 INTERNATIONAL LN | When was the debt incurred? 10/2010 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | MADISON Wisconsin 53704 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | <u></u> | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 片 | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |

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| Debtor | | L. | | ewart | Case number (if known) |
|---------|------------------------------------|-----------------------|-------------------|---------------------|---|
| | First Name | Middle Na | me La | st Name | |
| Part 2: | Your NONPRIO | RITY Unsecured (| Claims - Continu | ation Page | |
| | After listing any ent | ries on this page, nu | ımber them beginn | ing with 4.5, follo | wed by 4.6, and so forth. |
| 4.16 | US DEPT OF ED/GLE | | | Last 4 die | gits of account number 1577 \$14,315.00 |
| | Nonpriority Creditor's | | | When wa | s the debt incurred? 7/2009 |
| | 2401 INTERNATIONA Number Street | AL LIN | | while it wa | stile debt iliculted: 1/2009 |
| | Number Street | | | As of the | date you file, the claim is: Check all that apply. |
| | - | | | Conti | ingent |
| | MADISON | Wisconsin | 53704 | = | uidated |
| | City | State | Zip Code | = ' | |
| | Who incurred the de | ebt? Check one. | | Dispu | uted |
| | Debtor 1 only | | | Type of N | IONPRIORITY unsecured claim: |
| | Debtor 2 only | | | ✓ Stude | ent loans |
| | Debtor 1 and Del | btor 2 only | | - Oblig | ations arising out of a separation agreement or |
| | At least one of th | e debtors and anothe | , | | ce that you did not report as priority claims |
| | At least one of th | e debiois and anothe | | _ | s to pension or profit-sharing plans, and other similar |
| | Check if this cla | aim relates to a com | munity debt | debts | |
| | Is the claim subject | to offset? | | Other | r. Specify |
| | ✓ No | | | | |
| | = | | | | |
| | Yes | | | | |

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Debtor 1 Ezrarette Stewart Case number (if known) Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$8,083.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$8,083.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$70,898.00

| Total | claims | |
|-------|--------|--|
| from | Part 2 | |

6f. Student loans

- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- \$0.00
- 6h. Debts to pension or profit-sharing plans, and other similar
- \$0.00
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- \$10,138.00

6j. Total. Add lines 6f through 6i.

\$81,036.00

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| Fill in this information to identify your case: | | | | | | | | |
|---|------------|-------------|-----------------------------|--|--|--|--|--|
| Debtor 1 | Ezrarette | L. | Stewart | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois(State) | | | | | |
| Case number | | | | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or compa | any with whom you have | the contract or lease | State what the contract or lease is for | | |
|-----|-----------------------|------------------------|-----------------------|---|--|--|
| 2.1 | RMC Holdings an | d Investments | | Residential Lease, | | |
| | Name 7193 Douglas Blv | | | Debtor is Lessee, | | |
| | | | | 1 year lease | | |
| | Number | Street | | | | |
| | Douglasville | Georgia | 30135 | | | |
| | City | State | Zip Code | | | |

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| | | | Do | Cument Page | 52 01 00 |
|-----------------|-----------------------------------|-----------------------------|---|-------------------------------|---|
| Fill in | this infor | mation to identify your c | ase: | | |
| Debto | or 1 | Ezrarette | L. | Stewart | |
| | | First Name | Middle Name | Last Name | |
| Debto (Spous | or 2 e, if filing) | First Name | Middle Name | Last Name | |
| United | d States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case | number | | | (State) | |
| (If knov | | | | | |
| | | | | | Check if this is an |
| Οŧŧ | : -: -1 | Camaa 10011 | | | amended filing |
| Oπ | ıcıaı | Form 106H | | | |
| Sch | edul | e H: Your Cod | lebtors | | 12/15 |
| | | | | | omplete and accurate as possible. If two married people are |
| the en | tries in t | | , | • | ace is needed, copy the Additional Page, fill it out, and number of any Additional Pages, write your name and case number (if |
| 1. [| o you h a ✓ No ✓ Yes | ve any codebtors? (If yo | ou are filing a joint case, do | not list either spouse as a c | odebtor.) |
| | | | lived in a community propinco, Puerto Rico, Texas, Wa | - • | Community property states and territories include Arizona, California, |
| Į į | ✓ No. | Go to line 3. | | | |
| Ī | Yes. | Did your spouse, forme | r spouse, or legal equival | ent live with you at the tim | e? |
| _ | _ | No | | | |
| | | Yes. In which communit | y state or territory did you | live? | _ Fill in the name and current address of that person. |
| | | Name of your spouse, f | ormer spouse, or legal equiv | valent | <u> </u> |
| | | Number Street | | | |
| | | City | State | Zip Code | _ |
| | | | | | |
| 3. li | n Column | 1 1, list all of your codel | | | rour spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | 50 | oamone | . ago co | | | |
|----------|--|---|----------------------------|------------------------|--------------------|--|------------|
| Fill in | this information to identify | your case: | | | | | |
| Debto | r 1 Ezrarette | L. | Stewar | t | | | |
| | First Name | Middle Name | Last Na | ime | — Che | eck if this is: | |
| Debto | r 2 e, if filing) First Name | NAC-L-III - NI | 1 1 . 1 . | | - - | An amended filing | |
| (Spouse | First Name | Middle Name | Last Na | ime | | • | ر مر 10 |
| the: | States Bankruptcy Court for number | Northern | _ District of Illin (St | nois ate) | | A supplement showing post-petition chapte expenses as of the following date: | er ic |
| (If know | | | | | = | MM / DD / YYYY | |
| Offic | cial Form 106I | | | | | | |
| Sch | edule I: Your In | come | | | | 1 | 2/15 |
| spouse | e. If more space is needed er (if known). Answer ever | l, attach a separate she y question. | | _ | | not include information about your ional pages, write your name and cas | ie |
| | II in your employment | | Debtor 1 | | | Debtor 2 | |
| | formation. | Employment status | ✓ Employ | red | | Employed | _ |
| att | you have more than one job, tach a separate page with formation about additional | | Not Em | | | Not Employed | |
| en | nployers. | Occupation | | | | | _ |
| | clude part time, seasonal, or lf-employed work. | Employer's name | Addison Gr | oup | | _ | _ |
| | ccupation may include student homemaker, if it applies. | Employer's address | 125 S Wac | ker Dr # 27th Fl et | oor | Number Street | _ |
| | | | | | | | - |
| | | | Chicago | Illinois | 60606 | | _ |
| | | | City | State | Zip Code | City State Zip Code | _ |
| | | How long employed there? | | | | | |
| Part | 2: Give Details About M | Monthly Income | | | | | |
| | | the date you file this forr | n. If you have r | nothing to repo | rt for any line, v | write \$0 in the space. Include your non-filing | 3 |
| | se unless you are separated. | | | | | Mark and the Property of the Control | |
| | or your non-filing spouse have space, attach a separate she | | , combine the ii | | | or that person on the lines below. If you nee For Debtor 2 or | d |
| | | | | For D | Debtor 1 | non-filing spouse | |
| | List monthly gross wages, saldeductions.) If not paid monthly be. | | | 2. | \$2,773.33 | | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3. | + \$0.00 | | |
| 4. | Calculate gross income. Add I | ine 2 + line 3. | | 4. | \$2,773.33 | | |
| | | | | | | | |

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| Debto | r 1Ezrarette First Name | | Stewart Last Name | | Case number known) | (if | |
|-----------------------|---------------------------------------|---|----------------------|---------|------------------------|-----------------------------------|-------------------------|
| | Thot Namo | inidale Name | Luot Hamo | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Сор | y line 4 here | | → 4 | | \$2,773.33 | | |
| 5. List | all payroll ded | | | | | | |
| 5a. | Tax, Medicare, | and Social Security deductions | 5 | a. | \$448.46 | | |
| 5b. | Mandatory cor | ntributions for retirement plans | 5 | b. | \$0.00 | | |
| 5c. | Voluntary cont | ributions for retirement plans | 5 | c. | \$0.00 | | |
| 5d. | Required repay | yments of retirement fund loans | 5 | d. | \$0.00 | | |
| 5e. | Insurance | | 5 | e. | \$0.00 | | |
| 5f. I | Domestic supp | ort obligations | 5 | f. | \$0.00 | | |
| 5g. | Union dues | | 5 | g. | \$0.00 | | |
| 5h. | Other deduction | ons. Specify: | _ 5 | h. + | \$0.00 + | | |
| 6. Add +5h. | the payroll ded | ductions. Add lines 5a + 5b + 5c + 5d + 5e +5f | f + 5g 6 | - | \$448.46 | | |
| 7. Calc | culate total mo | nthly take-home pay. Subtract line 6 from line | e 4. | Ē | \$2,324.88 | | |
| 8. List | all other incon | ne regularly received: | | | | | |
| | business, profe | • | | | | | |
| | | ent for each property and business showing ordinary and necessary business expenses, and vinet income. | 8 | a. | \$0.00 | | |
| | Interest and di | • | | b. | \$0.00 | | |
| 8c. | | payments that you, a non-filing spouse, or | a | | | | |
| | | , spousal support, child support, maintenance, ent, and property settlement. | 8 | C. | \$0.00 | | |
| 8d. | Unemploymen | t compensation | 8 | d. | \$0.00 | | |
| 8e. | Social Security | , | 8 | e. | \$0.00 | | |
| | Include cash ass cash assistance | ent assistance that you regularly receive sistance and the value (if known) of any non- that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es | 8 | f. | \$0.00 | | |
| 8g. | Pension or ret | irement income | | g. | \$0.00 | | |
| 8h. | Other monthly | income. Specify: | | h. + | \$0.00 + | | |
| 9. Add | all other incom | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | ⊦8h. 9 | . [| \$0.00 | | |
| | | r income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp | 1 pouse | 0. | \$2,324.88 + | = | \$2,324.88 |
| Incl frien | ude contribution nds or relatives. | gular contributions to the expenses that you as from an unmarried partner, members of your amounts already included in lines 2-10 or amounts. | household, | your o | lependents, your roomn | | |
| Spe | ecify: | | | | | | 1. + \$0.00 |
| | | n the last column of line 10 to the amount in n the Summary of Schedules and Statistical Sun | | | | | \$2,324.88 |
| | | | | | | | Combined monthly income |
| 13. Do | you expect an No. | increase or decrease within the year after y | you file this | s form' | • | | |
| | Yes. Explain: | | | | | | |
| | | | | | | | |

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|--|------------------------------------|---|--|-------------------|---|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Ezrarette First Name | L. Middle Name | Stewart Last Name | | |
| Debtor 2 | | aa.o raine | | Check if this is: | 20 |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | |
| United States B Case number | sankruptcy Court for the | : <u>Northern</u> [| District of Illinois (State) | | nowing post-petition chapter 13 he following date: |
| (If known) | | | | MM / DD / YYYY | / |
| | Form 106J e J: Your E xp | nansas | | | 12/15 |
| Be as complete information. If (if known). Ans | e and accurate as pos | sible. If two married people al , attach another sheet to this | re filing together, both are equall form. On the top of any additions | | |
| 1. Is this a join | | | | | |
| ✓ No. Go | to line 2 | | | | |
| | oes Debtor 2 live in a | separate household? | | | |
| | ¬ No | • | | | |
| | _ | file Official Forms 106.I-2 <i>Exper</i> | nses for Separate Household of Debi | or 2 | |
| 2 Do you have | | No | oss for copulate frequencia of Bost | <u> </u> | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | | Child | 20 years | No. |
| | | | | | ✓ Yes. |
| | enses include f people other | No | | | |
| yourself and dependents | ı youi | ⁄es | | | |
| Part 2: Estir | nate Your Ongoing | Monthly Expenses | | | |
| Estimate your | expenses as of your b | pankruptcy filing date unless y | ou are using this form as a suppl plemental Schedule J, check the | | - |
| | • | cash government assistance it on Schedule I: Your Income | • | | Your expenses |
| | or home ownership e | xpenses for your residence. In | clude first mortgage payments and | | \$900.00 |
| If not incl | uded in line 4: | | | | |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Ezrarette L. Stewart Case number (if known)
First Name Middle Name Last Name

| First Name | Middle Name Last Name | | |
|---|--|------------|------------------|
| | | | Your expenses |
| 5. Additional mortgage payme | ents for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural ga | as | 6a. | \$225.00 |
| 6b. Water, sewer, garbage co | llection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, In | ternet, satellite, and cable services | 6c. | \$280.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping sup | pplies | 7. | \$450.00 |
| 8. Childcare and children's ed | lucation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry o | leaning | 9. | \$125.00 |
| 10. Personal care products ar | nd services | 10. | \$125.00 |
| 11. Medical and dental expen | ses | 11. | \$50.00 |
| 12. Transportation. Include gas Do not include car payment | | 12. | \$175.00 |
| 13. Entertainment, clubs, recr | reation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions a | nd religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance dec | ducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify | <u>/:</u> | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease paym | ents: | 10 | |
| 17a. Car payments for Vehicl | | 17a | \$0.00 |
| 17b. Car payments for Vehicl | e 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| | | 17d | \$0.00 |
| | , maintenance, and support that you did not report as deducted from | | \$0.00 |
| | ıle I, Your Income (Official Form 106I). | 18. | |
| | to support others who do not live with you. | | |
| Specify: | and included in lines A out of this forms on on Oaks dule I. Very largers | 19. | \$0.00 |
| 20a. Mortgages on other pro | ses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 200 | \$0.00 |
| 20b. Real estate taxes. | k-0.1 | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | | |
| 20d. Maintenance, repair, and | | 20c 20d | \$0.00 \$0.00 |
| 20e. Homeowner's association | | | |
| 200. Homoowner 3 association | on condominant ducc | 20e | \$0.00 |

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| Debtor 1 Ezra | | L. | Stewart | Case number (if known) | | |
|----------------------|--|---------------------|-------------|------------------------|-----|------------|
| Firs | t Name | Middle Name | Last Name | | | |
| 21. Other. Sp | pecify: | | | | 21 | \$0.00 |
| | | | | | | |
| | e your monthly expenses. | | | | | \$2,330.00 |
| | lines 4 through 21. | | | | | \$0.00 |
| | y line 22 (monthly expenses | ,, ,, | | | | \$2,330.00 |
| 22c. Add | line 22a and 22b. The result | is your monthly exp | enses. | | 22. | |
| 23.Calculate | e your monthly net income |). | | | | |
| 23a. Cop | y line 12 (your combined mo | onthly income) from | Schedule I. | | 23a | \$2,324.88 |
| 23b. Cop | y your monthly expenses fro | m line 22 above. | | | 23b | \$2,330.00 |
| | tract your monthly expenses | | ncome. | | | (\$5.12) |
| The | result is your monthly net in | come. | | | 23c | |
| | nple, do you expect to finish e payment to increase or dec Explain here: | | | | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|------------------------------|---|--|--|--|--|
| Debtor 1 | Ezrarette | L. | Stewart | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | _ | | | | |
| Case number | | _ | | _ | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | elp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Ezrarette Stewart | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 6/7/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in this info | rmation to identify your c | ase: | | | | | |
|---|---|---|--|---------------------------------------|---------------|--------------------|-----------------------------------|
| Debtor 1 | Ezrarette | 1 | Stewart | | | | |
| | First Name | Middle Na | | e | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Na | ame Last Nam | <u> </u> | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illino | is | | | |
| Case number | | | (State | e) | | | |
| (If known) | | | | | | | — |
| Official | Form 107 | | | | | | Check if this is a amended filing |
| | ent of Financia | l Δffaire fo | r Individuals | Filing for | Rankru | intev | 04/1 |
| Be as comple information. number (if kn | ete and accurate as po If more space is neede lown). Answer every q | ssible. If two ma d, attach a sepa uestion. | rried people are filing trate sheet to this form | ogether, both a On the top of | are equally i | responsible for | |
| Part 1: Give | e Details About Your | Marital Status a | and Where You Lived | Before | | | |
| 1. What is | your current marital sta | ntus? | | | | | |
| ☐ Ma | arried | | | | | | |
| ✓ No | t married | | | | | | |
| 2. During | the last 3 years, have yo | u lived anywhere | other than where you liv | re now? | | | |
| ✓ No ☐ Yes | s. List all of the places yo | ou lived in the last | 3 years. Do not include v | vhere you live no | w. | | |
| De | btor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | Same as I | Debtor 1 | | Same as Debtor 1 |
| Nu | mber Street | | From | Number Street | | | From |
| | | | То | | | | То |
| | | | | | | | |
| City | y State | Zip Code | | City | State | Zip Code | |
| | | | | Same as I | Debtor 1 | | Same as Debtor 1 |
| Nui | mber Street | | From | Number Street | | | From |
| | | | То | | | | То |
| | | | | | | | |
| City | y State | Zip Code | | City | State | Zip Code | |
| 3. Within th and territo | | wer live with a spo mia, Idaho, Louisia | ana, Nevada, New Mexico, | in a community p Puerto Rico, Texa | property stat | e or territory? (C | Community property states |

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| Deb | tor 1 | Ezrarette L. | Stewa | | e number (if known) | |
|------|---------------------------------|---|--|--|--|---|
| | | | e Name Last Na | ame | | |
| Part | 2: | Explain the Sources of Your Inc | come | | | |
| 4. | Fill i | you have any income from employm n the total amount of income you receivities. If you are filing a joint case and you No Yes. Fill in the details. | ved from all jobs and all bus | sinesses, including part-tim | е | rs? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | om January 1 of current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$14800.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: anuary 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | \$31998.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: anuary 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | \$22606.00 | Wages, commissions, bonuses, tips Operating a business | |
| | Inclu publ filing List | you receive any other income during ide income regardless of whether that in ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples come; interest; dividends; n you received together, list in | of other income are alimor noney collected from lawsu t only once under Debtor 1 | its; royalties; and gambling and lott | · · · · · · |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | | | | |
| | | or last calendar year: lanuary 1 to December 31, 2016) YYYY | | | | |
| | | or the calendar year before that: lanuary 1 to December 31, 2015) YYYY | | | | |
| | | | | | <u> </u> | |

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Stewart Debtor 1 Ezrarette Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| insider? | or 1 Ezrarette | | L. | Ste | wart | Case number | (if known) |
|--|--|---|--|--|--|---|---|
| insides include your relatives; any general partners; relatives of any general partners; partnerships of which you are an ageneral partner; corporations of which you are an office, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Ves. List all payments to an insider. Dates of payment Total amount paid Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider. No Ves. List all payments that benefited an insider. Dates of payments on debts guaranteed or cosigned by an insider. No Ves. List all payments that benefited an insider. Dates of payment paid Amount you still owe Reason for this payment include payments or transfer any property on account of a debt that benefited an insider. No Ves. List all payments that benefited an insider. Dates of payment amount paid Amount you still owe Include creditor's name Number Street City State Zip Code Insider's Name Number Street Number Street | First Name | | Middle Name | Last | Name | | |
| Ves. List all payments to an insider. Dates of payment Dates of Dates of Dates of Dates of Payment Dates of Dates of Payment Dates of Date | Insiders include y corporations of v agent, including such as child sup | your relatives; a vhich you are a one for a busir | any general partners an officer, director, p ness you operate as | ; relatives of any goerson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | ou are a general partner; g securities; and any managing |
| Dates of payment Dates of pay | ك | navments to | an insider | | | | |
| Number Street City State Zip Code | | paymente te | arrinodor. | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | Insider's Nar | me | | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No Yes. List all payments that benefited an insider. Dates of payment paid Total amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street | Number Stre | eet | | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street | City | State | Zip Code | | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider: No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | Insider's Nar | me | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Total amount paid Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street | Number Stre | eet | | | | | |
| Include payments on debts guaranteed or cosigned by an insider. No | City | State | Zip Code | | | | |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street | insider? Include payments No | s on debts gua | aranteed or cosigne | d by an insider. der. Dates of | Total amount | Amount you | Reason for this payment |
| Number Street City State Zip Code Insider's Name Number Street | | | | | | | Include creditor's name |
| City State Zip Code Insider's Name Number Street | Insider's Nar | me | | | | | |
| Insider's Name Number Street | Number Stre | eet | | | | | |
| Number Street | City | State | Zip Code | | | | |
| | Insider's Nar | me | | | | | |
| City State Zin Code | Number Stre | eet | | | | | |
| | - | | | | | | |

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Stewart Debtor 1 Ezrarette Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Deb | tor 1 Ezrarette First Name | L. Middle Name | Stewart Last Name | Case number (if known) | |
|------|-------------------------------|---|--------------------------|--|-----------------------|
| 11. | | ake a payment because yo | | oank or financial institution, set off any amo | ounts from your |
| | | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | | |
| | Number Street | | Last 4 digits of account | number: XXXX- | |
| | City St | rate Zip Code | | | |
| 12. | | filed for bankruptcy, was a stodian, or another officia | | possession of an assignee for the benefit o | f creditors, a court- |
| | ✓ No ☐ Yes | | | | |
| Part | 5: List Certain Gifts a | and Contributions | | | |
| 13. | ✓ No Yes. Fill in the detail | ls for each gift. | | otal value of more than \$600 per person? | |
| | Gifts with a total val | lue of more than \$600 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You | Gave the Gift | | | |
| | Number Street | | | | |
| | City St Person's relationship | ate Zip Code to you - | | | |
| | Person to Whom You | Gave the Gift | | | |
| | Number Street | | | | |
| | City St Person's relationship | ate Zip Code to you | | | |

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| Debt | tor 1 | Ezrarette First Name | L. Middle Name | Stewart Last Name | Case number (if known, | | |
|------|----------|---|-----------------------|--|-------------------------------|--------------------------|------------------------|
| 14. | Wit | thin 2 years before you filed t | or bankruptcy, did | you give any gifts or contrib | outions with a total value of | more than \$600 | to any charity? |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details for ea | ch gift or contributi | on. | | | |
| | | Gifts or contributions to ch that total more than \$600 | arities | Describe what you cont | tributed | Date you contributed | Value |
| | | Charity's Name | | - | | | |
| | | Number Street | | - | | | |
| | | City State | Zip Code | - | | | |
| Part | 6: | List Certain Losses | | | | | |
| | | No Yes. Fill in the details. Describe the property you how the loss occurred | lost and | Describe any insurance Include the amount that pending insurance claims A/B: Property. | insurance has paid. List | Date of your loss | Value of property lost |
| | | | | | | | |
| Dart | 7. | List Certain Payments o | r Transfers | | | | |
| | | out seeking bankruptcy or pr lude any attorneys, bankruptcy No Yes. Fill in the details. | | | , , | Date payment or transfer | Amount of payment |
| | | Semrad Law Firm | | Attornov's Foo - 0.00 | | was made 6/6/2017 | \$0.00 |
| | | Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | 60603 | Attorney's Fee - 0.00 | | 0/0/2017 | φ0.00 |
| | | City State | Zip Code | _ | | | |
| | | Email or website address None | | | | | |
| | | Person Who Made the Payme | ent, if Not You | | | | |
| | | Person Who Was Paid | | - | | | |
| | | Number Street | | - | | | |
| | | City State | Zip Code | - | | | |
| | | Email or website address | | - | | | |
| | | Person Who Made the Payme | ent, if Not You | - | | | |

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| Debtor 1 | Ezrarette | L. | Stewart | Case number (if know | vn) | |
|----------|--|------------------------|---|--------------------------|--|------------------------|
| | First Name | Middle Name | Last Name | _ | | |
| he | thin 1 year before you file Ip you deal with your cred not include any payment o No Yes. Fill in the details. | litors or to make payr | _ | ır behalf pay or transf | er any property to a | anyone who promised to |
| | res. Fill in the details. | | | | | |
| | | | Description and value of an transferred | y property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | - | | | |
| | Number Street | | _ | | | |
| | City State | Zip Code | - - | | | |
| | Only | Zip Oodo | | | | |
| | No Yes. Fill in the details. | | Description and value of pro transferred | payments | iny property or received or debts p | |
| | | | _ | in exchang | ge | made |
| | Person Who Received Tra | ansfer | _ | | | |
| | Number Street | | _ | | | |
| | City State Person's relationship to y | Zip Code ou | _ | | | |
| | Person Who Received Tra | ansfer | - | | | |
| | Number Street | | _ | | | |
| | City State Person's relationship to y | Zip Code ou | _ | | | |
| be | thin 10 years before you fi neficiary? nese are often called asset-p | | id you transfer any property to a | self-settled trust or si | milar device of whi | ch you are a |
| <u> </u> | No Yes. Fill in the details. | | | | | |
| L | 1 co. 1 iii iii die detailo. | | Description and value of the | ne property transferre | d | Date transfer was made |
| | Name of trust | | | | | |

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Stewart

Debtor 1 Ezrarette Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Stewart Debtor 1 Ezrarette Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Ezrarette | | L. | Stewart | Case n | number (if known) | |
|-------|--------------|----------------------|------------------|-------------------|-----------------------------|---------------------|---|----------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a part | y in any judici | ial or administra | ative proceeding under | r any environmenta | I law? Include settlements and orde | ers. |
| | | NI= | | | | | | |
| | \mathbf{P} | No | , | | | | | |
| | Ш | Yes. Fill in the det | tails. | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the |
| | | Case title | | | | | | case |
| | | | | | | | | Pending |
| | | | | (| Court Name | | | |
| | | Case number | | | NumberStreet | | | On appeal |
| | | | | _ | | | | Concluded |
| | | | | Ō | City State | Zip Code | | _ |
| Part | 11. | Give Details Al | hout Your B | usiness or Co | nnections to Any Bu | ısiness | | |
| I all | | GIVE Details A | Jour Tour D | 43111033 01 00 | inicodons to Any Du | 13111033 | | |
| 27. | With | nin 4 years before | you filed for I | bankruptcy, did | you own a business or | have any of the fol | lowing connections to any business | ? |
| | | - | | | | - | | |
| | | | | · · | de, profession, or othe | | -time or part-time | |
| | | A member of | f a limited liab | ility company (L | LC) or limited liability pa | artnership (LLP) | | |
| | | A partner in a | a partnership | | | | | |
| | | An officer, di | rector, or mai | naging executiv | e of a corporation | | | |
| | | An owner of a | at least 5% of | f the voting or e | quity securities of a cor | poration | | |
| | _ | | | | | | | |
| | ⊻ | No. None of the a | | | | | | |
| | | Yes. Check all tha | at apply abov | e and fill in the | details below for each t | ousiness. | | |
| | | | | | Describe the nati | ure of the business | • • | |
| | | | | | | | include Social Security no | umber or ITIN. |
| | | Business Name | | | _ | | EIN: | |
| | | 240000 . 140 | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | | | | Name of account | ant or bookkeeper | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the nati | ure of the business | Employer Identification n include Social Security no | |
| | | | | | | | | |
| | | Business Name | | | _ | | EIN: | |
| | | | | | _ | | _ | |
| | | Number Street | | | Name of | | Dates business existed | |
| | | 0:: | 2: : | 7: 0 ! | Name of account | ant or bookkeeper | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the nati | ure of the business | Employer Identification n | umber Do not |
| | | | | | Describe the nati | are or the business | include Social Security n | |
| | | | | | | | EIN: | |
| | | Business Name | | | _ | | LIIV. | |
| | | | | | _ | | | |
| | | Number Street | | | Name of a second | and an bardler | Dates business existed | |
| | | 0.1 | 01-1- | 7'- 0 1 | Name of account | ant or bookkeeper | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Debte | or 1 Ezrarette | | L. | Stewart | Case number (if known) |
|------------------------------|----------------|--|--|---------------------------------|---|
| | First Name | | Middle Name | Last Name | |
| | creditors, or | other parties. | or bankruptcy, did yo | ou give a financial statemo | ent to anyone about your business? Include all financial institutions, |
| | Yes. Fill in | n the details below. | | | |
| | | | | Date issued | |
| | Name | | | MM/DD/YYYY | |
| | Ivanie | | | | |
| | Number | Street | | _ | |
| | | | | <u>_</u> | |
| | City | State | Zip Code | | |
| Part | 12: Sign Be | elow | | | |
| tı | rue and corre | ct. I understand tha ase can result in fi | t making a false sta nes up to \$250,000, | tement, concealing prope | ents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | ^ | /s/ Ezrarette St | | | |
| | | Signature of Debto | or 1 | | Signature of Debtor 2 |
| | | Date 6/7/2017 | | | Date |
| _ n | id vou attach | additional names to | Vour Statement of | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| | _ | additional pages to | o rour otatement of | Tillalicial Allalis for illulvi | duals I mily for Danki upicy (Omeral I om 107): |
| Ŀ | No | | | | |
| | Yes | | | | |
| D | oid you pay or | agree to pay some | one who is not an at | torney to help you fill out | bankruptcy forms? |
| Į, | ✓ No | | | | |
| ֓֞֞֞֜֞֜֞֜֞֜֜֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֟ | Yes. Name | of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this infor | Fill in this information to identify your case: | | | | | | | | |
|---------------------------|---|-------------|------------------------------|--|--|--|--|--|--|
| Debtor 1 | Ezrarette | L. | Stewart | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | | |
| Case number (If known) | | | (Glate) | | | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

creditors have claims secured by your property, or

Part 1: List Your Creditors Who Have Secured Claims

you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: GATEWYFINSOL Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2008 Ford Focus Retain the property and [explain]: Surrender the property. Creditor's No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and

[explain]:

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| Debtor | Ezrarette | L. | Stewart | Case number (if | |
|---------|-----------------------------|--------------------------|--------------------------|---|----------|
| 1 | First Name | Middle Name | Last Name | known) | <u> </u> |
| Part 2: | List Your Unexpire | d Personal Property Lea | ses | | |
| informa | ition below. Do not list | | d leases are leases that | Contracts and Unexpired Leases (Official Form 106G are still in effect; the lease period has not yet ended. U.S.C. § 365(p)(2). | |
| De | scribe your unexpired p | personal property leases | | Will the lease be assumed? | |
| Les | ssor's name: | | | No Yes | |
| | scription of leased perty: | | | | |
| Les | ssor's name: | | | □ No □ Yes | |
| | scription of leased perty: | | | | |
| Les | ssor's name: | | | □ No □ Yes | |
| | scription of leased perty: | | | | |
| Les | ssor's name: | | | □ No □ Yes | |
| | scription of leased perty: | | | | |
| Les | ssor's name: | | | No Yes | |
| | scription of leased perty: | | | | |
| Les | ssor's name: | | | No Yes | |
| | scription of leased perty: | | | _ | |
| Les | ssor's name: | | | □ No □ Yes | |
| | scription of leased perty: | | | _ | |
| Part 3: | Sign Below | | | | |
| Unde | | | I my intention about any | property of my estate that secures a debt and any per | rsonal |
| × | /s/ Ezrarette Stewart | | × | | |
| S | ignature of Debtor 1 | | Sig | nature of Debtor 2 | |
| D | eate 6/7/2017 MM/DD/YYYY | | Dat | e MM/DD/YYYY | |
| | | | | | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Nortnern Dis | strict of Illinois | |
|-------|---|----------------------------|---|----------------------------------|
| In re | Ezrarette L. Stewart | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| | DISCLOSURE OF | COMPENSAT | ION OF ATTORNEY F | OR DEBTOR |
| 1 | | year before the filing of | ertify that I am the attorney for the ab the petition in bankruptcy, or agreed t mplation of or in connection w ith the | to be paid to me, for services |
| | For legal services, I have agreed to a | ccept | | \$1,315.00 |
| | Prior to the filing of this statement I | have received | | \$0.00 |
| | Balance Due | | | \$1,315.00 |
| 2 | . The source of the compensation pair | d to me was: | | |
| | ✓ Debtor | Other (spec | cify) | |
| 3 | . The source of the compensation paid | d to me is: | | |
| | ✓ Debtor | Other (spec | sify) | |
| 4 | I have not agreed to share the ab members and associates of my l | | ation with any other person unless the | ey are |
| | | w firm. A copy of the agre | n with a other person or persons who ement, together with a list of the nam | |
| 5 | . In return for the above-disclosed fee | , I have agreed to render | legal service for all aspects of the ban | kruptcy case, including: |
| | a. Analysis of the debtor's finar bankruptcy; | ncial situation, and rende | ring advice to the debtor in determinir | ng whether to file a petition in |
| | b. Preparation and filing of any | petition, schedules, state | ements of affairs and plan which may | be required; |
| | c. Representation of the debtor | at the meeting of credito | ers and confirmation hearing, and any | adjourned hearings thereof; |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee doe | s not include the following services: | |
| | | | | |
| | | CERTI | FICATION | |
| | I certify that the foregoing is a comple tor(s) in this bankruptcy proceedings. | te statement of any agree | ement or arrangement for payment to | me for representation of the |
| | 6/7/2017 | | /s/ Jason Diaz | |
| | Date | | Signature of Attorney | |
| | | | | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Stewart, Ezrarette L. | Case No. | Case No. | | |
|-----------------|-----------------------|---|-------------------------------------|--|--|
| | Debtor(s) | | | | |
| | | Chapter. | Chapter7 | | |
| | VERIFI | CATION OF CREDITOR MAT | RIX | | |
| Th knowledge | | fy that the attached list of creditors is tru | ue and correct to the best of their | | |
| Date: | 6/7/2017 | /s/ Stewart, Ezrare | ette L. | | |
| | | Stewart, Ezrarette Signature of Debt | | | |

US DEPT OF ED/GLELSI 2401 INTERNATIONAL LN MADISON, WI, 53704

GATEWYFINSOL 221 North La Salle Street # 1000 Chicago, IL, 60601

ISAC PO Box 6180 Indianapolis, IN, 46206

CAVALRY PORTFOLIO SERV 4050 E COTTON CENTER BLV PHOENIX, AZ, 85040

DEVRY INC 1 TOWER LN STE 1000 OAKBROOK TERRACE, IL, 60181

HARVARD COLLECTION 4839 ELSTON AVE CHICAGO, IL, 60630

PORTFOLIO RECOVERY ASS 140 Corporate Blvd Norfolk, VA, 23502

CREDIT COLLECTION SERV SHAWNEE SQUARE CHILLICOTHE, OH, 45601

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256 IRS 1 PO Box 7346 Philadelphia, PA, 19101

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Devon Financial Services - Ashland 9455 S Ashland Ave Chicago, IL, 60620

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

Peoples Gas Light & Coke Co. 200 E. Randolph St. Chicago, IL, 60601 Case 17-17404 Doc 1 Filed 06/07/17 Entered 06/07/17 09:47:45 Desc Main Document Page 61 of 68

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,315.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 06/07/2017

.___

Attorney

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| Debtor 1 Exarette First Name | L. Middle Name | Stewart Last Name | Case number (if known) | |
|---|--|--|---|--|
| | estions for Reporting Purp | | | |
| 16. What kind of debts do you have? | 16a. Are your debts prin "incurred by an indiv No. Go to line 16 Yes. Go to line 16 Are your debts prin money for a busines No. Go to line 16 Yes. Go to line 16 | narily consumer deb vidual primarily for a p 6b. 7. narily business debts is or investment or thr 6c. 7. | ts? Consumer debts are defersonal, family, or househousehouseld. Pausiness debts are debts rough the operation of the bout consumer debts or busing | that you incurred to obtain ousiness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ✓ No. I am not filing under Chexpenses are paid ✓ No. ✓ Yes. | apter 7. Do you estimat | | rty is excluded and administrative creditors? |
| How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | [] 5,001- | 5,000 10,000 I-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,00 \$50,00 | 0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,00 \$50,00 | 0,001-\$10 million 10,001-\$50 million 10,001-\$100 million 100,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | if I have chosen to file under of title 11, United States Counder Chapter 7. If no attorney represents me out this document, I have our request relief in accordance understand making a false connection with a bankrupt ooth. 18 U.S.C. §§ 152, 13. /// Ezrarette Steward Signature of Debtor 1 Executed on 6/7/20 | er Chapter 7, I am awa ode. I understand the e and I did not pay or btained and read the ex with the chapter of e statement, concealing cy case can result in f 41, 1519, and 3571. | re that I may proceed, if elig relief available under each o agree to pay someone who notice required by 11 U.S.C title 11, United States Code g property, or obtaining mo | e, specified in this petition. oney or property by fraud in orisonment for up to 20 years, or |

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| Fill in this info | rmation to identify your car | se: | | | |
|---------------------------|--|----------------------------|--|---|-----------------------------------|
| Debtor 1 | Ezrarette | L, | Stewart | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | *************************************** | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern I | District of Illinois | | |
| | • | | (State) | | |
| Case number (If known) | ACCOMPANY OF THE PROPERTY OF T | | · · · · · · · · · · · · · · · · · · · | | |
| Official | Form 106Dec | | | | Check if this is a amended filing |
| Declarat | tion About an Ir | ndividual Debto | r's Schedule | s | 12/1 |
| If two married | people are filing together | , both are equally respons | ible for supplying corre | ect information. | |
| money or brot | 1341, 1519, and 3571. | n with a bankruptcy case | can result in fines up to | Making a false statement, concealing propert o \$250,000, or imprisonment for up to 20 yea | rs, or both. 18 |
| Did you p | pay or agree to pay someor | ne who is NOT an attorney | to help you fill out bar | okruptcy forms? | |
| IJ No | | • | , , , , , , , , , , , , , , , , , , , | | |
| 图 , | | | | | |
| Yes. | Name of person | | Attach Bankruptcy Signature (Official I | Petition Preparer's Notice, Declaration, and Form 119). | |
| | | | | | |
| | | | | | |
| | | | | | |
| Under pe that they | | | | d with this declaration and | |
| 🗶 /s/ Ezrar | ette Stewarly GAAS | ete Steve | t x | | |
| Signature | of Debtor 1 | | | re of Debtor 2 | |
| Date 6/7/ | | | Date | | |
| MM | /DD/YYYY | | M | M/DD/YYYY | |

MM/DD/YYYY

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| | r 1 Ezrarette First Name | 1. | Stewart | Case number (if known) |
|---------------|--|--|--|--|
| | rirst ivame | Middle Name | Last Name | |
| 28. \ | Nithin 2 years before y creditors, or other par | you filed for bankruptcy, did ties. | you give a financial stater | nent to anyone about your business? Include all financial institutions, |
| iconical from | ✓ No Yes. Fill in the deta | aile halmu | | |
| Ł | e i doi i mili dio dete | AND DEROYV. | <u> Alexandre a Chefa na estantante de l'estante</u> | 94 |
| | | | Date Issued | |
| | Name | | MM/DD/YYYY | ··· |
| | Number Street | | _ | |
| | City | | _ | |
| | City | State Zip Code | | |
| Pari 1 | Sign Below | | | |
| l h | ave read the answers. | on this Ctatamant of Figure 1 | tul Age of the same | |
| | ankruptcy case can re | esult in fines up to \$250,000, | or imprisonment for up to | nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | ankruptcy case can re | esult in fines up to \$250,000, | | erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | ankruptcy case can re /s/ Ex Signature | zrarette Stewart | or imprisonment for up to | erty, or obtaining money or property by fraud in connection with 20 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| a b | /s/Es Signature Date 6/ | zrarette Stewart (7/2017 | or imprisonment for up to | Signature of Debtor 2 Date |
| a b | /s/Es Signature Date 6/ | zrarette Stewart (7/2017 | or imprisonment for up to | Signature of Debtor 2 Date |
| a b | /s/Es Signature Date 6/ | zrarette Stewart (7/2017 | or imprisonment for up to | erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 |
| a b | /s/E: Signature Date 6/ | zrarette Stewart (7/2017 | or imprisonment for up to | Signature of Debtor 2 Date |
| Did | /s/Ei Signaturn Date 6/ you attach additional No | zrarette Stewart (1/2017 I pages to Your Statement of | f Financial Affairs for Indiv | Signature of Debtor 2 Date iduals Filing for Bankruptcy (Official Form 107)? |
| Did | /s/Ei Signaturn Date 6/ you attach additional No | zrarette Stewart (7/2017 | f Financial Affairs for Indiv | Signature of Debtor 2 Date iduals Filing for Bankruptcy (Official Form 107)? |

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| Debte | or Ezrarette | | Stewart | Case number (if |
|--------------|--|---|--|---|
| 1 | First Name | Middle Name | Last Name | known) |
| Part 2 | List Your Unexpire | ed Personal Property Leas | es | |
| For a | ny unexpired personal p nation below. Do not lis | roperty lease that you listed in | n Schedule G: Executory | Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| D | escribe your unexpired | personal property leases | | Will the lease be assumed? |
| L | essor's name: | | ng nga paga pang populati ng p | ☐ No ☐ Yes |
| | escription of leased roperty: | | | ženosoš |
| Le | essor's name: | | | No grandy |
| | escription of leased operty: | | | |
| Le | essor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | Book |
| Le | essor's name: | | | No Yes |
| | escription of leased operty: | | | Attronolis |
| Le | ssor's name: | | | No Yes |
| | scription of leased operty: | | | Bioscond C |
| Les | ssor's name: | | | No Yes |
| | scription of leased operty: | | | Streetwood |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | Second C |
| ant 3: | Sign Below | te antique to militar antique to de contrata the design of the contrata the design of contrata contrata to a security of the group of | et med trad til et til et til ett til til til til et med til en stadet er til et til et til et til et til et m | |
| Unde prop | er penalty of perjury, I de erty that is subject to a | n unexpired lease. | Z3 | operty of my estate that secures a debt and any personal |
| | /s/ Ezrarette Stewart X | Eparette | Slewout = | |
| | ate 6/7/2017 MM/DD/YYYY | ** | Signa | ture of Debtor 2 MM/DD/YYYY |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| 113 16. | Debtor(s) | Case No. | Case No. | | |
|-----------------|--|---|--|--|--|
| | | Chapter. | Chapter7 | | |
| | VERI | FICATION OF CREDITOR MATI | RIX | | |
| Tr knowledge | ne above named Debtors hereby ve e. | erify that the attached list of creditors is tru | e and correct to the best of their | | |
| Date: | 6/7/2017 | /s/ Stewart, Ezrarete Stewart, Ezrarette Signature of Debte | I. 4 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | | |

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| Debtor 1 Ezrarette First Name | L, | Stewart | Case number (if know) | n) | |
|--|--|---|----------------------------------|--|--|
| 8. Unemployment compensation Do not enter the amount if you co | Middle Name | Last Name | Column A Debtor 1 \$0.00 | Column B Debtor 2 or non-filing spouse | |
| under the Social Security Act. Instr For you For your spouse | ead, list it here: | \$0.00 | | ************************************** | |
| 9. Pension or retirement income. | | \$0.00 | | | |
| benefit under the Social Security A 10.Income from all other sources amount. Do not include any beneficially benefit and the sources payments received as a victim of a international or domestic terrorism page and put the total below. | ct. not fisted above.Specif its received under the So war crime a crime again | y the source and cial Security Act or | \$0.00 | | |
| Total amounts from separate page | s, if any, | | +\$0.00 | 4 | promote the second seco |
| 11. Calculate your total current meach | onthly income. Add line | es 2 through 10 for | \$3,059.85 | | = \$3,059.85 |
| column. Then add the total for C | column A to the total for | Column B. | | | |
| Paril 2 Determine Whether the | Means Test Annlie | s to You | | | Total current monthly income |
| 12. Calculate your current monthly | income for the year, F | ollow these steps: | | | |
| 12a. Copy your total current month | •• | | | e 11 here → | \$3,059.85 |
| Multiply by 12 (the number o 12b. The result is your annual inco | | m. | | 12b. | X 12 \$36,718.20 |
| 13 Calculate the median family inco | ome that applies to you | . Follow these steps: | | | |
| Fill in the state in which you live. | | Illinois | | | |
| Fill in the number of people in your | | 2 | | | |
| Fill in the median family income for household. | your state and size of | | | 13. | \$66,487.00 |
| To find a list of applicable median in instructions for this form. This list in 4. How do the lines compare? | icome amounts, go onli nay also be available at th | ne using the link specified e bankruptcy clerk's offic | I in the separate e. | L | |
| 14a. Line 12b is less than or ed Go to Part 3. | qual to line 13. On the to | p of page 1, check box 1 | , There is no presumption of abo | use. | |
| 14b. Line 12b is more than line Go to Part 3 and fill out Fo | 13. On the top of page orm 122A-2. | 1, check box 2, The pres | sumption of abuse is determined | by Form 122A-2. | |
| Part 🗫 Sign Below | | | | | |
| By signing here, I declare under pe | nalty of perjury that the i | nformation on this statem | ent and in any attachments is tr | ue and correct. | activa (1,000 minus) Anni (1,000 m |
| /s/ Ezrarette Stewart Signature of Debtor 1 | parette & | tewait x | gnature of Debtor 2 | | |
| Date 6/7/2017 | | | • | | |
| MM/DD/YYYY | | Da | MM/DD/YYYY | | 200 |
| If you checked line 14a, do NOT If you checked line 14b, fill out F | fill out or file Form 122A orm 122A-2 and file it wi | -2. th this form. | | | |